DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. HP-10013861

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A METHOD FOR DESCR	RATIONS					L TOPOLOGIES
the specification of which				-		
() was filed on Number	_ and w	a as amende	s US Applicated on	ation Serial No. or PC (if applications	CT International . pplicable).	A pplication
I hereby state that I had including the claims, as disclose all information with the control of	ave revi amend which is	ewed and ed by any material to	understood amendment patentabilit	the contents of the c(s) referred to abov y as defined in 37 C	above-identifie e. I acknowled FR 1.56.	d specification, lge the duty to
Foreign Application(s) and for (Claim of Fe	oreign Priority				
I hereby claim foreign priority inventor(s) certificate listed be filing date before that of the a	low and h	nave also iden	tified below an	y foreign application for p		
COUNTRY		APPLICATIO	N NUMBER	DATE FILED	PRIORITY CLAIMED U	INDER 35 U.S C. 119
					YES:	NO:
					YES:	NO:
Provisional Application I hereby claim the benefit unbelow:	der Title 3	35, United St	ates Code Sec	tion 119(e) of any United	l States provisional	application(s) listed
	APPL	ICATION SERIAL	NUMBER	FILING DATE		
1						
			1			
information as defined in Title 37, Code application and the national or PCT inter						
POWER OF ATTORNEY: As a named inventor, I here business in the Patent and Tra					ecute this application	on and transact all
Customer N	Number [022879		Place Customer Number Bar Code Label here		
Send Correspondence to:	IDA NIV			Direct Telephone	Calls To:	
HEW LETT-PACKARD CON Intellectual Property Admir				JAMES P. HAO		
P.O. Box 272400 Fort Collins, Colorado 80	527-2400			(408) 938-9060		
I hereby declare that al made on information and the knowledge that will or both, under Section may jeopardize the valid	d belief ful false 1001 of	are believe statement Title 18 o	ed to be true s and the lil f the United	e; and further that the ke so made are puni States Code and th	ese statements v shable by fine o	were made with r imprisonment,
Full Name of Inventor: <u>JULI</u>	EA. SY	MONS		Citizenship: US	SA	
Residence: 64	7 FALLO	N AVE., S	ANTA CLAR	A, CA 95050		
Post Office Address: SA	MEASI	RESIDENCE				
MULASU	MON			10-2-0	01	
Inventor's Signature				Date /		

Rev 10/00 (DecPwr)

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. HP-10013861

Full Name of # 2 joint inventor:	SHARAD SINGHAL		Citizenship:	USA
Residence:	11 WAKEFIELD COURT, BELMONT	, CA 9	4002	
Post Office Address:	SAME AS RESIDENCE			
Inventor's Signature		Date	- 1 - 1 - 1 - 1	
Full Name of # 3 joint inventor:			Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 4 joint inventor:	-		Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 5 joint inventor:			Citizenship:	
Residence:				
Post Office Address:			·	
Inventor's Signature	τ	Date		
Full Name of # 6 joint inventor:			Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date	 	
•				
Full Name of # 7 joint inventor:	: 		Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature	ī	Date		
Full Name of # 8 joint inventor			Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date	 	

ļai.

ija (F.

Jail.

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. HP-10013861

As a below named inventor, I hereby declare that:

AND DEVICE CONFIGURATIONS

My residence/post office address and citizenship are as stated below next to my name;

the specification of which is attached hereto unless the following box is checked:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A METHOD FOR DESCRIBING AND COMPARING DATA CENTER PHYSICAL AND LOGICAL TOPOLOGIES

() was filed on	as US Application Serial No. or PCT International Application and was amended on (if applicable).				
I hereby state that I have including the claims, as a disclose all information wh		ad the contents of the	above identifie	ed specification.	
Foreign Application(s) and for Cla	im of Foreign Priority				
I hereby claim foreign priority b inventor(s) certificate listed belo- filing date before that of the app	enefits under Title 35, United S w and have also identified below	any foreign application for p	any foreign applicat patent or inventor(s)	tion(s) for patent or certificate having a	
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119	
			YES:	NO:	
			YES:	NO:	
Provisional Application				11 - Li - L/L S Hahad	
I hereby claim the benefit unde below:	r Title 35, United States Code S	Section 119(e) of any Unite	d States provisional	application(s) listed	
	APPLICATION SERIAL NUMBER	FILING DATE			
insofar as the subject matter of manner provided by the first partial information as defined in Title 3	er Title 35, United States Code, is each of the claims of this applaragraph of Title 35, United States, Code of Federal Regulations, CT international filing date of this	tes Code Section 112, I acl Section 1.56(a) which occu	knowledge the duty	to disclose material	
A DRIVE A TION OF DIA LAUMANED	FUINO DATE				
APPLICATION SERIAL NUMBER	FILING DATE	STATUS	(patented/pending/abandoi	ned)	
APPLICATION SERIAL NUMBER	FILING DATE	STATUS	(patented/pending/abandoi	ned)	
APPLICATION SERIAL NUMBER	FILING DATE	STATUS	(patented/pending/abandoi	ned)	
APPLICATION SERIAL NUMBER	FILING DATE	STATUS	(patented/pending/abandoi	ned)	
POWER OF ATTORNEY: As a named inventor. I hereb	y appoint the following attorne emark Office connected therew it	y(s) and/or agent(s) to pro			
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trad	y appoint the following attorne emark Office connected therewit	y(s) and/or agent(s) to pro h:			
POWER OF ATTORNEY: As a named inventor. I hereb	y appoint the following attorne emark Office connected therewit	y(s) and/or agent(s) to pro h:			
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trad Customer No. Send Correspondence to:	y appoint the following attorne emark Office connected therewit	y(s) and/or agent(s) to pro h: Place Customer Number Bar Code	secute this applicat		
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trad Customer No Send Correspondence to: HEWLETT-PACKARD COMI	y appoint the following attorne emark Office connected therewit	y(s) and/or agent(s) to pro h: Place Customer Number Bar Code Label here	secute this applicat		
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trad Customer No Send Correspondence to: HEWLETT-PACKARD COMI	y appoint the following attorne emark Office connected therewith umber 022879 PANY istration	y(s) and/or agent(s) to pro h: Place Customer Number Bar Code Label here Direct Telephor	secute this applicat		
POWER OF ATTORNEY: As a named inventor, I hereby business in the Patent and Trade Customer Note Send Correspondence to: HEWLETT-PACKARD COMINITELLIBECTUAL Property Administration P.O. Box 272400 Fort Collins, Colorado 805: I hereby declare that all made on information and the knowledge that willfor both under Section 1	y appoint the following attorne emark Office connected therewith umber 022879 PANY istration	y(s) and/or agent(s) to proh: Place Customer Number Bar Code Label here Direct Telephor JAMES P. HAC (408) 938-906 of my own knowledge true; and further that the like so made are purited States Code and the solution of the solution o	secute this applicate The Calls To: Of are true and the hese statements in the statements in the statement with a such willful the statement willful the statement willful the statement willful the statement will the statement will the statement will statement with the statement will state will state will state will state will state will statement will state will state with the statement will state will statement will state will st	tion and transact all	
POWER OF ATTORNEY: As a named inventor, I hereby business in the Patent and Trade Customer Note Send Correspondence to: HEWLETT-PACKARD COMINITELLIBECTUAL Property Administration P.O. Box 272400 Fort Collins, Colorado 805: I hereby declare that all made on information and the knowledge that willfor both under Section 1	y appoint the following attorne emark Office connected therewith umber 022879 PANY stration 27-2400 statements made herein of belief are believed to be followed by the belief and the control of Title 18 of the Unity of the application or any	y(s) and/or agent(s) to proh: Place Customer Number Bar Code Label here Direct Telephor JAMES P. HAC (408) 938-906 of my own knowledge true; and further that the like so made are purited States Code and the solution of the solution o	secute this applicate the Calls To: are true and the hese statements in the calls the calls the call	tion and transact all	
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trade Customer No. Send Correspondence to: HEWLETT-PACKARD COMINITED Intellectual Property Adminited P.O. Box 272400 Fort Collins, Colorado 805: I hereby declare that all made on information and the knowledge that willf or both, under Section 1 may jeopardize the validited. Full Name of Inventor: JULIE	y appoint the following attorne emark Office connected therewith umber 022879 PANY stration 27-2400 statements made herein of belief are believed to be followed by the belief and the control of Title 18 of the Unity of the application or any	Place Customer Number Bar Code Label here Direct Telephor JAMES P. HAC (408) 938-906 of my own knowledge true; and further that the like so made are purited States Code and the patent issued thereory Citizenship:	secute this applicate the Calls To: are true and the hese statements in the calls the calls the call	tion and transact all nat all statements swere made with or imprisonment, false statements	
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trade Customer Note Send Correspondence to: HEWLETT-PACKARD COMI Intellectual Property Admini P.O. Box 272400 Fort Collins, Colorado 805: I hereby declare that all made on information and the knowledge that willf or both, under Section 1 may jeopardize the validi Full Name of Inventor: JULII Residence: 647	y appoint the following attorne emark Office connected therewith the connected there with the connected the c	Place Customer Number Bar Code Label here Direct Telephor JAMES P. HAC (408) 938-906 of my own knowledge true; and further that the like so made are purited States Code and the patent issued thereory Citizenship:	secute this applicate the Calls To: are true and the hese statements in the calls the calls the call	tion and transact all nat all statements swere made with or imprisonment, false statements	

Date

Inventor's Signature

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. HP-10013861

Full Name of # 2 joint inventor:	SHARAD SINGHAL		Citizenship: USA
Residence:	11 WAKEFIELD COURT, BELMO	ONT, CA	94002
Post Office Address:	SAME AS RESIDENCE		
Inventor's Signature	Delighan	Date	10/3/01
Full Name of # 3 joint inventor:	- All Control of the		Citizenship:
Residence:			
Post Office Address:			All Control of the Co
Inventor's Signature		Date	
Full Name of # 4 joint inventor:			Citizenship:
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 5 joint inventor	:		Citizenship:
Residence:		. .	
Post Office Address:		····	
Inventor's Signature		Date	
Full Name of # 6 joint inventor	r:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 7 joint invento	r:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of #8 joint invento	or:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	